COVID-19 Screening Survey

1. Sanitize ALL guests hands upon entry to the clinic
2. Ask ALL patient and caregivers the following questions:

3. Do you have any of the following symptoms?
   - Fever
   - Cough
   - Difficulty breathing
   - Sore throat
   - Shortness of breath

4. Have you come in contact with anyone that is suspected of or has COVID-19?
5. Have you traveled outside the country within the last 14 days?
6. Have you been to the hospital for any of these symptoms in the last 14 days?
7. Have you been put on home quarantine within the last 14 days?

If No to all questions ➤ No further action required. Patient/caregivers may wait in the waiting area. Give the patient/caregivers an ‘I’ve been screened’ sticker.

If Yes to any of the questions ➤ Patient/caregivers should be isolated
*Any non-essential caregiver with symptoms should remain in the car*
➤ Instruct the patient/caregiver to put on a mask (make sure it covers their mouth and nose)
➤ Place the patient/caregiver into designated isolation waiting area (Or exam room depending on which clinic you are at)
➤ Notify back office of PUI
➤ Place patient/caregiver in designated exam room with the door closed
➤ Place droplet precaution “STOP” sign on the door